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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
Northern District of: Illinois		
(State)		
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	Check if this
	Chapter 13	amended filin

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Ronnie	
	First name	First name
Write the name that is on your government-issued	D	
picture identification (for	Middle name	Middle name
example, your driver's license or passport	Smith	
licerise or passport	Last name	Last name
Bring your picture	0.69.40.41.41	
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
	Middle name	Middle name
Include your married or maiden names.		
	Last name	Last name
	First name	First name
	NA: -I-II	MC stell a sa assa a
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>2611</u>	XXX - XX-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number (ITIN)		

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Debtor 1 Ronnie First Name	D         Smith           Middle Name         Last Name	Case number (if known)
i list ivalle	Wildlie Name Last Name	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	129 S May St Number Street	Number Street
	Joliet Illinois 60436	
	City State Zip Code Will	City State Zip Code
	County	County
	If your mailing address is different from the one	If Debtor 2's mailing address is different from yours,
	above, fill it in here. Note that the court will send any notices to you at this mailing address.	fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
<ol> <li>Why you are choosing this district</li> </ol>	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Ronnie	D	Smith	Case number (if kno	wn)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Ab	out Your Bankruptcy C	ase		
7. The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and		
8. How you will pay the fee	more details about cashier's check, or may pay with a cre  I need to pay the findividuals to Pay  I request that my judge may, but is not the official poverty you choose this op	how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-print fee in installments. If you choose Your Filing Fee in Installments (Coffee be waived (You may request not required to, waive your fee, and line that applies to your family significant.	ou are paying the submitting your ed address. e this option, sign official Form 103, this option only and may do so only tize and you are u	
9. Have you filed for bankruptcy within the last 8 years?	Yes. District  District  District	WhenWhenWhen	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  ☐ Yes. Debtor  District  Debtor  District	<u>W</u> hen	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you rent your residence?	✓ No. Go to	ord obtained an eviction judgment a o line 12. ut <i>Initial Statement About an Eviction</i> oankruptcy petition.		

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Debtor 1 Ronnie First Name		D Mid	Idle Name	Smith Last Name	Case nu	ımber <i>(if known</i> )		
Part 3: Report About Any	Busir	esses	You Own as a Se	ole Proprietor				
12. Are you a sole proprietor of any full-or part-time	<b>V</b>	No. Yes.	Go to Part 4.  Name and location	o of business				
business?	Ц	163.	Traine and location of business					
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity			Name of business,	if any Stree	ot .			
such as a corporation, partnership, or LLC.								
If you have more than one sole proprietorship, use a			Cheek the appro	prioto bay to de	State	Zip Cod	de	
separate sheet and					escribe your business			
attach it to this petition.			_	· ·	efined in 11 U.S.C. § s defined in 11 U.S.C			
·			_		11 U.S.C. § 101(53A			
			Commodity	Broker (as defi	ned in 11 U.S.C. § 10	01(6))		
			None of the	above				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small</i> business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B).							
For a definition of	<b>✓</b>	No.	I am not filing unde	er Chapter 11.				
small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				ng to the definition in the	
		Yes.	I am filing under C Code.	hapter 11 and I	am a small business	debtor according to	the definition in the Bankrupto	СУ
Part 4: Report if You Own	or H	ave A	ny Hazardous Pro	perty or Any	Property That Nee	eds Immediate Atte	ention	
14. Do you own or have	<b>✓</b>	No.						
any property that poses or is alleged to pose a threat of	es or is alleged to $\square$		What is the hazard?					
imminent and identifiable hazard to public health or			If immediate attention	n is needed, why	is it needed?			
safety? Or do you own any property			Where is the property					
that needs immediate attention?				Number	Street			
For example, do you								
own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City		State	Zip Code	

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Debtor 1 Ronnie D Smith Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Ronnie First Name		mith Case r	number (if known)		
	estions for Reporting Purposes	SCHAITE			
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily by the second s	orimarily for a personal, fami pusiness debts? Business of vestment or through the ope	lebts are debts that you incurred to obtain eration of the business or investment.		
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fu  No.		y exempt property is excluded and administrative te to unsecured creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	million		
Part 7: Sign Below	11	11.1.1			
For you	correct.  If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may understand the relief availal I I did not pay or agree to pay	oerjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 ole under each chapter, and I choose to proceed a someone who is not an attorney to help me fill red by 11 U.S.C. § 342(b).		
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Ronnie Smith Signature of Debtor 1		Signature of Debtor 2		
	Executed on 3/15/2017 MM / DD	/ <del>/ / / / / / / / / / / / / / / / / / </del>	Executed on		

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Debtor 1 Ronnie	D	Smith	Case number (if)	known)					
First Name	Middle Name	Last Name							
For your attorney, if you are represented by one	eligibility to proceed ur	nder Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the					
If you are not	debtor(s) the notice req	lebtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I							
represented by an	have no knowledge afte	er an inquiry that the	information in the sched	ules filed with the petition is incorrect.					
attorney, you do not	4.4								
need to file this page.	/s/ Brenda Likaved	;	Date	3/15/2017					
	Signature of Attorney	for Debtor	M	M / DD / YYYY					
	Brenda Likavec								
	Printed name								
	Semrad Law Firm								
	Firm name								
	2424 Plainfield Road								
	Street								
	Suite 300								
	<u> </u>								
	Crest Hill		Illinois	60403					
	City		State	Zip Code					
	Occidental	040050070							
	Contact phone	3122568701	Email address	blikavec@semradlaw.com					
	Bar number		Illinois State						
	Dar Hulliber		State						

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Ronnie	D	Smith
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

	Check if	this	is	an
_	amende	d filir	ng	

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<u>·</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,601.00
1c. Copy line 63, Total of all property on Schedule A/B	\$2,601.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	<u>-</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$26,626.28
Your total liabilities	\$26,626.28
Part 3: Summarize Your Income and Expenses	<u> </u>
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,050.97
5. Schedule J: Your Expenses (Official Form 106J)	\$3,053.00
5. Schedule 6. Tour Expenses (Official Form 1909)	

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Deb	tor 1 Ronnie First Nar	mo	D Middle Name	Smith Last Name	Case number (if known)					
Part				ive and Statistical Re	ecords					
6. <b>A</b>	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?									
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
Ŀ	✓ Yes.									
7. <b>W</b>	hat kind of	debt do you have?								
Ŀ					rred by an individual primarily for a personal, stical purposes. 28 U.S.C. § 159.					
Г	•	, ,	• ( )		on this part of the form. Check this box and s	ubmit				
		to the court with your oth								
		atement of Your Curren Line 11; <b>OR</b> , Form 1226			t monthly income from Official	\$3,819.63				
9.	Copy the fo	ollowing special catego	ries of claims fro	m Part 4, line 6 of Sche	dule E/F:					
	From Part	4 on Schedule E/F, copy	y the following:		Total claim					
	9a. Domest	ic support obligations (Co	opy line 6a.)		\$0.00					
	9b. Taxes a	nd certain other debts you	u owe the governn	ment. (Copy line 6b.)	\$0.00					
	9c. Claims f	\$0.00								
	9d. Student	loans. (Copy line 6f.)			\$0.00					
		ons arising out of a separa	ation agreement o	r divorce that you did not	report as \$0.00					
		pension or profit-sharing	\$0.00 6h.)							

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your	case:				
			Conside			
Debtor 1	Ronnie First Name	D Middle Name	Smith Last Name			
Debtor 2 (Spouse, if fi	ling) First Name	Middle Name	Loot Nome			
	- I list ivalite		Last Name			
United Sta	ates Bankruptcy Court for the	: Northern	District of Illinois (State)			
Case num (If known)	nber					
Officia	L Form 106A/D				Check if this is an	
	al Form 106A/B				amended filing	
Sche	dule A/B: Prop	erty			12/	
category responsib write your	where you think it fits best. le for supplying correct info name and case number (if	Be as complete and acc ormation. If more space is known). Answer every qu	sset only once. If an asset fits in more urate as possible. If two married people needed, attach a separate sheet to the lestion.  Other Real Estate You Own or Ha	e are filing together, both a nis form. On the top of any a	re equally	
1. Do you	ı own or have any legal or e	equitable interest in any r	esidence, building, land, or similar pro	pperty?		
<b>✓</b>	No. Go to Part 2					
	Yes. Where is the property?					
			is the property? Check all that apply.		claims or exemptions. Put	
1.1	Street address, if available, o	r other description	ngle-family home	the amount of any secured claims on Schedule a Creditors Who Have Claims Secured by Property		
		<u> </u>	uplex or multi-unit building ondominium or cooperative	Current value of the	Current value of the	
			anufactured or mobile home	entire property?	portion you own?	
	Number Street		and	Describe the nature o	f vour ownership	
		<u> </u>	vestment property meshare	interest (such as fee s	imple, tenancy by	
	City State		ther	the entireties, or a life	e estate), if known.	
		Who I	has an interest in the property? Check	Check if this is co (see instructions)	mmunity property	
		D	ebtor 1 only	ш		
		<u> </u>	ebtor 2 only			
		<u> </u>	ebtor 1 and Debtor 2 only t least one of the debtors and another			
			r information you wish to add about th	is itam such as local		
			erty identification number:	is item, such as local		
If you	own or have more than one,					
1.2			is the property? Check all that apply.  ngle-family home	the amount of any secu	claims or exemptions. Put red claims on Schedule D:	
	Street address, if available, o	r other description	uplex or multi-unit building	Creditors Who Have Cla	ims Secured by Property.	
			ondominium or cooperative	Current value of the entire property?	Current value of the portion you own?	
		<u> </u>	anufactured or mobile home			
	Number Street		and vestment property	Describe the nature o	f your ownership	
		<u> </u>	meshare	interest (such as fee s the entireties, or a life		
	City State	Zip Code	ther			
		Who I one.	has an interest in the property? Check	Check if this is co (see instructions)	mmunity property	
			ebtor 1 only	_		
		<u> </u>	ebtor 2 only			
		<u> </u>	ebtor 1 and Debtor 2 only t least one of the debtors and another			
				is itam such as lead		
			r information you wish to add about the erty identification number:	is item, such as local		

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Debtor 1	Ronnie First Name	D Middle Name	Smith Last Name	Case numbe	r (if known)	
	et address, if available, or oth		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	t apply.	the amount of any secu	•
City	State		Timeshare Other  Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Other information you wish to add	nother	(see instructions)	mmunity property
	the dollar value of the port ve attached for Part 1. Writ	ion you own for te that number h		luding any entrie	s for pages	
<b>Do you ow</b> you own t	hat someone else drives. If your strucks, tractors, sport utili	<b>equitable interes</b> ou lease a vehicle,	t in any vehicles, whether they are also report it on Schedule G: Execute cycles	-	-	
3.1	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
3.2	Make Model:		At least one of the debtors a Check if this is community instructions)  Who has an interest in the proone.	y property (see	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i>
	Year: Approximate mileage: Other information:		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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btor 1	Ronnie	D	Smith	Case numb	er (if known)	
	First Name	Middle Name	Last Name			
3.3	Make		Who has an interest in the p	roperty? Check		claims or exemptions. P
	Model:		one.			red claims on <i>Schedule</i> aims Secured by Property
	Year:		Debtor 1 only		Creditors with mave Cla	uills secured by Property
	Approximate mileage:	<del></del>	Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communi	tv property (see		
			instructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
3.4	Make		Who has an interest in the p	roperty? Check	Do not deduct secured	claims or exemptions. P
	Model:		one.		•	red claims on Schedule
	Year:		Debtor 1 only		Creditors Who Have Cla	nims Secured by Property
	Approximate mileage:	<del></del>	Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communi	ty property (see		
			Parada and Carana N			
Exar			instructions)  ner recreational vehicles, other versions of the state			
Exar	nples: Boats, trailers, motor No Yes Make		ner recreational vehicles, other vehicles, other vehicles, must be seen that the seen that the period of the seen that the seen	otorcycle accessor	Do not deduct secured	
Exar	nples: Boats, trailers, motor No Yes		the recreational vehicles, other very fit, fishing vessels, snowmobiles, means which we have an interest in the property one.	otorcycle accessor	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motor No Yes Make Model:		who has an interest in the prone.  Debtor 1 only	otorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	claims or exemptions. Pared claims on Schedule nims Secured by Property
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone.  Debtor 1 only  Debtor 2 only	otorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exar	nples: Boats, trailers, motor No Yes Make Model: Year:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule iims Secured by Property
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only At least one of the debtors	otorcycle accessor roperty? Check  / and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check  / and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi	otorcycle accessor roperty? Check  / and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exar	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions)	otorcycle accessor roperty? Check  / and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property?  Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P
Exar	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the properties of the debtors	otorcycle accessor roperty? Check  / and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property?  Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P
Exar	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone.	otorcycle accessor roperty? Check  / and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property?  Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone.  Debtor 1 only	otorcycle accessor roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classian Creditors Who Have Classian Control	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P tred claims on Schedule hims Secured by Property
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone.  Debtor 1 only Debtor 2 only	otorcycle accessor roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P lived claims on Schedule hims Secured by Property  Current value of the
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone.  Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only	roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P lived claims on Schedule hims Secured by Property  Current value of the

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Smith Debtor 1 Ronnie D Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used household goods, books \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... iphone 7, xbox 1 \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$1000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Watch \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2000.00 for Part 3. Write that number here .....

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Debtor 1 Ronnie D Smith Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$1.00 17.1. Checking account: Wells Fargo 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Deb	tor 1 Ronnie	D Middle Name	Smith	Case number (if known)	
20.	First Name  Government and corpo	Middle Name orate bonds and other negotia	Last Name ble and non-negotiable	e instruments	
	Negotiable instruments i	include personal checks, cashiers ents are those you cannot transfe	s' checks, promissory no	tes, and money orders.	
	<b>✓</b> No				
	Yes. Give specific information about	Issuer name:			
	them				
21	Retirement or pension	accounts			
	Examples: Interests in IF		), thrift savings accounts	s, or other pension or profit-sharing plans	
	✓ Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:	401(k)		\$600.00
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:  Additional account:			
		Additional account:			
22.	Security deposits and	prepayments			
		I deposits you have made so tha with landlords, prepaid rent, publ			
	✓ No		Institution name:		
	Yes	Electric:			
		Gas:			-
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			_
		Water: Rented furniture:			
		Other:	-		
23.	Annuities (A contract fo	or a periodic payment of money t	o you, either for life or fo	r a number of years)	-
	<b>✓</b> No	Issuer name and description:			
	Yes				

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Debto	r 1 Ronnie	D	Smith	Case number (if known)	
	First Name	Middle Name	Last Name		
24.		n education IRA, in an account i 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or u	nder a qualified state tuition program.	
	✓ No  Yes	Institution name and description. §	Separately file the records of any int	erests.11 U.S.C. § 521(c):	
0.5	Turata agrita		by father then empthing listed in	ing 4) and vielets as necessary	
25.		ible or future interests in proper or your benefit	ty (other than anything listed in	me 1), and rights or powers	
	✓ No Yes. Desc	ribe			
26.		rights, trademarks, trade secretemet domain names, websites, prod			
	No Yes. Desc	ribe			
27.		nchises, and other general intan- lding permits, exclusive licenses, co	=	or licenses, professional licenses	
	✓ No				
	Yes. Desc	ribe			
Mon	ey or proper	ty owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ey or proper Tax refunds ov				portion you own?
					portion you own? Do not deduct secured
	Tax refunds ov ✓ No  Yes. Give s	ved to you specific information		Federal:	portion you own? Do not deduct secured
	Tax refunds ov  ✓ No  — Yes. Give s abou you a	pecific information t them, including whether already filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on  No  Yes. Give s abou you a and t	specific information t them, including whether already filed the returns the tax years			portion you own? Do not deduct secured claims or exemptions.
28.	No Yes. Give sabou you a and temples: Past	specific information t them, including whether already filed the returns the tax years	ll support, child support, maintenar	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor  Examples: Past	pecific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousa	ll support, child support, maintenar	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor  Examples: Past	specific information t them, including whether already filed the returns the tax years	ll support, child support, maintenar	State:  Local:  ice, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor  Examples: Past	pecific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousa	ll support, child support, maintenar	State:  Local:  Ice, divorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor  Examples: Past	pecific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousa	ll support, child support, maintenar	State: Local: ace, divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor  Examples: Past	pecific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousa	l support, child support, maintenar	State: Local:  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousa specific information	nents, disability benefits, sick pay,	State: Local:  Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on  ✓ No  Yes. Give s abou you a and t  Family suppor Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp	specific information It them, including whether Illready filed the returns the tax years  It due or lump sum alimony, spousa specific information	nents, disability benefits, sick pay,	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	No Yes. Give s about you a and t  Family support Examples: Past  No Yes. Give s  Other amount Examples: Unp Soc	specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousa specific information	nents, disability benefits, sick pay,	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Ronnie	D	Smith	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance paramples: Health, disability		savings account (HSA); credit, I	nomeowner's, or renter's insurance	
	No N	C	ompany name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insura of each policy and lis		erm Life through VANo Cash \	/alue	\$0.00
		_			
32.	Any interest in property If you are the beneficiary property because someon	of a living trust, expect pro		cy, or are currently entitled to receive	
	<b>✓</b> No				
	Yes. Describe				
33.			a have filed a lawsuit or made nce claims, or rights to sue	a demand for payment	
	<b>✓</b> No				
	Yes. Describe				
34.	Other contingent and u to set off claims	inliquidated claims of ev	ery nature, including counter	claims of the debtor and rights	
	<b>✓</b> No				
	Yes. Describe				
0.5					
35.	Any financial assets you	u did not aiready list			
	✓ No Yes. Describe				
0.0	A 1 1 11 - 1 - 11 1		And Article Brown and are		
36.		-	Part 4, including any entries for		\$601.00
Part	5: Describe Any Rus	siness-Related Prope	urty Vou Own or Have an I	nterest In. List any real estate in Pa	rt 1
37.			est in any business-related p		
	No. Go to Part 6.	- -			Current value of the
	Yes. Go to line 38.				portion you own? Do not deduct secured claims
38.	Accounts receivable or	commissions you alread	dy earned		or exemptions
	<b>√</b> No	•	-		
	Yes. Describe				
39.	Office equipment, furni Examples: Business-relat		nodems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, elec	ctronic devices
	<b>✓</b> No				
	Yes. Describe				

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Deb	tor 1 Ronnie	D	Smith	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you	use in business, and tools of yo	ur trade	
	<b>✓</b> No				
	Yes. Describe				
	_				
41.	Inventory				
	<b>✓</b> No				
	Yes. Describe				
	_				
40	Interests in partnersh	ing or igint vantures			
42.		iips or joint ventures			
	<b>✓</b> No		Name of entity:	% of ownership:	
	Yes. Give specific		ramo or onary.	% of ownereng.	
	information about them				
	urom				
12 (	Customor lists, mailing	lists, or other compilati	one		
45.		insts, or other complian	Ulis		
	<b>✓</b> No				
	Yes. Do your lists i	nclude personally identifial	ole information (as defined in 11 U	I.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not alre	eady list		
	<b>✓</b> No				
	Yes. Give specific				<del>_</del>
	information				
					<del>-</del>
					<del>_</del>
					_
			art 5, including any entries for		
<b>•</b>	art 3. Write that humbe	51 Here			
Part	Describe Any F	arm- and Commercia	al Fishing-Related Property	You Own or Have an Interest In.	
	If you own or have ar	interest in farmland, list it in	n Part 1.		
46.	Do you own or have a	ny legal or equitable int	erest in any farm- or commerci	al fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own? Do not deduct secured claims
					or exemptions
47.	Farm animals				
	Examples: Livestock, p	oultry, farm-raised fish			
	<b>√</b> No				
	Yes. Describe				
	ш				

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Deb	tor 1 Ronnie First Name	D Middle Name	Smith Last Name	Case number (if known)	
40			Last Name		
48.	Crops-either growing	or narvested			
	<b>✓</b> No				
	Yes. Describe				
49	Farm and fishing equir	oment, implements, machinery, fi	xtures and tools of trade	<b>A</b>	
10.	_	,	Ataros, and tools of trad	•	
	No				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	No No				
	Yes. Describe				
	Too: Booonbo				
51.	Any farm- and comme	rcial fishing-related property you	did not already list		
	<b>✓</b> No				
	Yes. Describe				
	_				
				Г	
		I of your entries from Part 6, incl		•	
for Pa	art 6. Write that number	r here			
				_	
D. d	Describe All Dre	namh. Vari Orin an Haria an Ir	torest in That You Di	d Not List Above	
Part		perty You Own or Have an Ir		d NOT LIST ADOVE	
53.		perty of any kind you did not alrease, country club membership	ady list?		
		.,			
	No Civo aposifia				
	Yes. Give specific information				
					·
-4 4	dd 4b - dallaul af al	U of commontation from Dont 7. West			
54. A	dd the dollar value of al	of your entries from Part 7. Write	e that number here		
Part	8: List the Totals of	Each Part of this Form			
55.1	Part 1: Total real estate	, line 2			<del></del>
56 1	part 2 total vehicles, lin	e 5			
	•	nd household items, line 15	Ф0000 00	<del></del>	
	•	·	\$2000.00	<u> </u>	
58. <b>F</b>	Part 4: Total financial as	sets, line 36	\$601.00	<u></u>	
59. I	Part 5: Total business-re	elated property, line 45			
60. I	Part 6: Total farm- and	fishing-related property, line 52		<del></del>	
61.1	Part 7: Total other prop	erty not listed, line 54	-		
02.	i otai personai property.	. Add lines 56 through 61	\$2601.00	Copy paragonal property total	+ \$2601.00
				Copy personal property total	
					\$2601.00
63. <b>T</b>	otal of all property on S	schedule A/B. Add line 55 + line 62			

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Official	Form 106C			Check if this is amended filing
Case number (If known)				Object Williams
			(State)	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
D. I	First Name	Middle Name	Last Name	
Debtor 1	Ronnie	D	Smith	

### amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Clain	n as Exempt				
2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Checking account, Wells Fargo Line from Schedule A/B: 17	\$1.00	\$1.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
	Brief description:  Used household goods, books  Line from Schedule A/B: 06	\$300.00	\$300.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?			

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Debtor 1 Ronnie D Smith Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$1,000.00 description: **✓** \$1,000.00 Used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$500.00 description: **✓** \$500.00 iphone 7, xbox 1 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$200.00 description: **✓** \$200.00 Watch 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(f) Brief \$0.00 description: Term Life through VA--100% of fair market value, up to any No Cash Value applicable statutory limit Line from Schedule A/B: 31 735 ILCS 5/12-1006 Brief \$600.00 description:

\$600.00

100% of fair market value, up to any

applicable statutory limit

401(k) or similar plan,

21

401(k)

Line from Schedule A/B:

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		_				
Fill in this info	rmation to identify your c	ase:				
Debtor 1	Ronnie	D	Smith			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						
Official	Form 106D			J		Check if this is an amended filing
Schedi	ule D: Credit	ors Who Hav	ve Claims Secure	ed by Prop	erty	12/15
more space is			e are filing together, both are equals ber the entries, and attach it to t			
1. Do any	creditors have claims	secured by your propert	y?			
✓ No.	Check this box and sub	mit this form to the court v	vith your other schedules. You hav	e nothing else to repo	ort on this form.	
Yes	. Fill in all of the information	on below.				
Part 1: List	All Secured Claims					
			ed claim, list the creditor separately	Column A	Column B	Column C
		ditor has a particular claim, alphabetical order according	list the other creditors in Part 2. As g to the creditor's name.	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports	Unsecured portion

this claim

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Fill in	this inforr	mation to identify your c	ase:			
Debto	or 1	Ronnie	D	Smith		
		First Name	Middle Name	Last Name		
Debto						
(Spous	e, if filing)	First Name	Middle Name	Last Name		
United	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)		
Case (If know	number vn)					
Offi	cial F	orm 106E/F				Check if this is an amended filing
Sc	hedu	ıle E/F: Cre	editors Who	Have Unse	cured Claims	12/1
other Form claims the en knowr	party to a 106A/B) a s that are stries in the n).	nny executory contracts and on Schedule G: Exe listed in Schedule D: C ne boxes on the left. At	s or unexpired leases that cutory Contracts and Ur Creditors Who Hold Claim	nt could result in a claim. Dexpired Leases (Official F Des Secured by Property. If	Also list executory contracts form 106G). Do not include an more space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
1.	Do any cr	editors have priority ur	secured claims against	vou?		
		Go to Part 2.	.ooou.ou oluo uguot	, • • •		
	Yes.					
l ,	listed, ider As much a	itify what type of claim it as possible, list the claims	is. If a claim has both prior in alphabetical order acco	rity and nonpriority amounts	s, list that claim here and show b s. If you have more than two price	arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Debto	r 1 Ronnie First Name	D Middle Name	Smith Last Name	Case number (if known)	
Part 2	<b>-</b>				
	o any creditors have nonpriorit  No. You have nothing to rep	y unsecured claims aga	inst you?	ourt with your other schedules.	
u If	nsecured claim, list the creditor se	parately for each claim. For	or each claim liste	f the creditor who holds each claim. If a creditor has mod, identify what type of claim it is. Do not list claims already to 3. If you have more than four priority unsecured claims fill	/ included in Part 1.
					Total claim
4.1	ALLNCE COL Nonpriority Creditor's Name Po Box 1267			st 4 digits of account number 9334 nen was the debt incurred? 3/2014	\$4,564.00
	Number Street		As	of the date you file, the claim is: Check all that apply.	
	Marshfield Wisco City State Who incurred the debt? Check ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors at  Check if this claim relates Is the claim subject to offset? ✓ No  Yes	one.		Contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other simila debts  Collection; Collecting for ORIGINAL CREDITOR: 09 STONE Other. Specify CROSSING APTS	ar
4.2	Americash - Bankruptcy				\$2,007.28
	Nonpriority Creditor's Name PO Box 184 Number Street  Des Plaines Illinoi City State Who incurred the debt? Check ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this claim relates Is the claim subject to offset? ✓ No Yes	Zip Code one. nd another	Wi	st 4 digits of account number  nen was the debt incurred?  11/16/16  sof the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  pe of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collecting For -	ar
4.3	ARS ACCOUNT RESOLUTION Nonpriority Creditor's Name 1801 NW 66TH AVE STE 200 Number Street		Wi	st 4 digits of account number 3314 nen was the debt incurred? 4/2014 of the date you file, the claim is: Check all that apply. Contingent	\$1,100.00
	PLANTATION Florio City State Who incurred the debt? Check  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors an  Check if this claim relates Is the claim subject to offset?  ✓ No  Yes	Zip Code one. nd another		Unliquidated Disputed  pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	ar

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Debtor 1 Ronnie D Smith \_ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 COMMONWEALTH FINANCIAL \$511.00 Last 4 digits of account number \_\_\_ 50N1 Nonpriority Creditor's Name \_\_\_1/2017 245 Main St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 18519 Scranton Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? **✓** 4.5

<b>✓</b> No	Other. Specify PAYMENT DATA			
Yes				
CREDIT ACCEPTANCE	Last 4 digits of account number 6233	\$6,399.00		
Nonpriority Creditor's Name PO BOX 513	When was the debt incurred? 2/2013			
Number Street	As of the date you file the claim in Cheek all that cont.			
	As of the date you file, the claim is: Check all that apply.  Contingent			
Southfield Michigan 48037 City State Zip Code	Unliquidated			
City State Zip Code Who incurred the debt? Check one.	Disputed			
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:			
Debtor 2 only	Student loans			
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts			
Check if this claim relates to a community debt	Other. Specify 048 Automobile	poply.  poply.  \$311.00  poply.		
Is the claim subject to offset?	_			
✓ No				
Yes				
CREDIT MANAGEMENT LP	— Last 4 digits of account number 1271	\$311.00		
Nonpriority Creditor's Name PO Box 118288	When was the debt incurred? 8/2015			
Number Street	As of the date you file the claim in Cheek all that cont.			
-	As of the date you file, the claim is: Check all that apply.  Contingent			
Carrollton Texas 75011	— Unliquidated			
City State Zip Code	불			
Who incurred the debt? Check one.  Debtor 1 only	Disputed			
Debtor 2 only	Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Student loans			
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?	001 Collection; Collecting for			
<b>✓</b> No	ORIGINAL CREDITOR: COMCAST Other. Specify CENTRAL WAREHOUSE			
Yes				

4.6

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Debtor 1 Ronnie First Name Case number (if known) Smith D Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim

4.7	CREDITORS DISCOUNT & A	Last 4 digits of account number 3160 —	\$80.00				
	Nonpriority Creditor's Name 415 E MAIN ST	When was the debt incurred? 2/2014					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	STREATOR Illinois 61364 City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.	Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar					
	Check if this claim relates to a community debt	debts					
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL CREDITOR: CITY OF					
	✓ No	Other. Specify JOLIET/PARKING					
	Yes						
4.8	CREDITORS DISCOUNT & A Nonpriority Creditor's Name	Last 4 digits of account number	\$80.00				
	415 E MAIN ST	When was the debt incurred? 3/2014					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	STREATOR Illinois 61364 City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.	Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or					
	At least one of the debtors and another	divorce that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	✓ 001 Collection; Collecting for					
	<b>✓</b> No	ORIGINAL CREDITOR: CITY OF Other. Specify JOLIET/PARKING					
	Yes						
4.9	JEFFERSON CAPITAL SYST	Last 4 digits of account number 5003 —	\$792.00				
	Nonpriority Creditor's Name 16 MCLELAND RD	When was the debt incurred? 8/2016					
	Number Street	·					
		As of the date you file, the claim is: Check all that apply.					
	SAINT CLOUD Minnesota 56303	Contingent					
	City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.  Debtor 1 only	Disputed					
	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only	Student loans					
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	✓ Other. Specify001 UnknownLoanType					
	✓ No						

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D Smith Debtor 1 Ronnie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** JEFFERSON CAPITAL SYST 4.10 \$544.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2016 16 MCLELAND RD Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD Minnesota 56303 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes 4.11 MARINE FEDERAL CREDIT \$0.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name 159 BRYNN MARR RD When was the debt incurred? 7/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE North Carolina 28546 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 060 Automobile Is the claim subject to offset? **✓** No Yes MARINR FINC 4.12 \$481.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 1748 Gunbarrel Rd #100 When was the debt incurred? 8/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent 37421 Chattanooga Tennessee Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ 18 InstallmentLoan Is the claim subject to offset? No

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D Smith Debtor 1 Ronnie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NAVY FEDERAL CR UNION \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/2008 820 FOLLIN LN SE Number As of the date you file, the claim is: Check all that apply. Contingent **VIENNA** Virginia 22180 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 018 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.14 NAVY FEDERAL CR UNION \$9,000.00 Last 4 digits of account number 0602 Nonpriority Creditor's Name 820 FOLLIN LN SE When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 22180 VIENNA Virginia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 072 Automobile Is the claim subject to offset? **✓** No Yes OMNI FINANCIAL OF NC 4.15 \$0.00 2910 Last 4 digits of account number Nonpriority Creditor's Name 431 WESTERN BLVD STE H When was the debt incurred? 10/2010 Number As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE 28546 North Carolina Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 010 InstallmentLoan Is the claim subject to offset? **✓** No

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D Smith Debtor 1 Ronnie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 **PIONEERMCB** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 4000 S EASTERN AVE STE 3 When was the debt incurred? 8/2010 Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS Nevada 89119 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ 013 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.17 **PIONEERMCB** \$0.00 Last 4 digits of account number 7382 Nonpriority Creditor's Name 4000 S EÁSTERN AVE STE 3 When was the debt incurred? 3/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS 89119 Nevada Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_\_ 016 InstallmentLoan Is the claim subject to offset? **✓** No Yes SECURITY FIN 4.18 \$457.00 Last 4 digits of account number Nonpriority Creditor's Name C/O SECURITY FINAN POB 3146 When was the debt incurred? 8/2009 Number As of the date you file, the claim is: Check all that apply. Contingent **SPARTANBURG** 29304 South Carolina Unliquidated City Zip Code Who incurred the debt? Check one Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ 18 InstallmentLoan Is the claim subject to offset? No

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Debtor 1	Ronnie First Name	D Middle Name	Smith Last Name	Case number (if known)					
Part 2:	Your NONPRIORITY Unse	ecured Claims - Cont	inuation Pa	ge					
	After listing any entries on this	page, number them beg	ginning with 4	4.5, followed by 4.6, and so forth.	Total claim				
1	USA LOANS Nonpriority Creditor's Name 292 S. Larkin Number Street			Last 4 digits of account number \$300.00  When was the debt incurred? n/a					
-	Joliet Illinois	60436		s of the date you file, the claim is: Check all that apply.  Contingent Unliquidated					
1	Dity State  Who incurred the debt? Check  Debtor 1 only  Debtor 2 only	Zip Code		Disputed  Type of NONPRIORITY unsecured claim:  Student loans					
	Debtor 1 and Debtor 2 only  At least one of the debtors ar	nd another	[	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar					
	Check if this claim relates s the claim subject to offset?  No Yes	to a community debt		✓ Other. Specify Collecting For -					

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Debtor 1 Ronnie D Smith Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Blitt and Gaines On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 661 Glenn Ave Line 4.5 Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured 60090 Wheeling Illinois Last 4 digits of account number 6233 City State Zip Code Verizon Wireless - Bankruptcy On which entry in Part 1 or Part 2 did you list the original creditor? 500 Technology Drive, Suite 550 Line 4.9 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles 63304 Missouri Last 4 digits of account number 5003 City State Zip Code

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Debtor 1 Ronnie D Smith Case number (if known)

First Name Middle Name Last Name

FIISLINA	me widdle Name Last Name			
Part 4: Add ti	ne Amounts for Each Type of Unsecured Claim			
	amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting	purpo
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00	
	amount here.  6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
	oc. Total. Add lines of through od.			
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$26,626.28	
	6i Total Add lines 6f through 6i	6i	\$26,626.28	

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Fill in this information to identify your case:									
Debtor 1	Ronnie	D	Smith						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States E	Sankruptcy Court for the:	Northern	District of Illinois						
Case number			(State)						

#### Official Form 106G

### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this infor	mation to identify you	case:		
Debtor 1	Ronnie	D	Smith	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	e: Northern	District of Illinois	
			(State)	<del></del>
Case number (If known)				<del></del>
				Check if this is an
Official	Form 106L	Ī		amended filing
Official	Form 106H	<u>-</u>		
Schedul	e H: Your Co	debtors		12/15
No Yes  Within the	e last 8 years, have yo		perty state or territory? ( <i>C</i>	odebtor.)  Community property states and territories include Arizona, California,
	Go to line 3.	1exico, Puerto Rico, Texas, W	ashington, and wisconsin.)	
		mer spouse, or legal equiva	lent live with you at the time	9?
	No		•	
	Yes. In which commu	nity state or territory did yo	ı live?	. Fill in the name and current address of that person.
	Name of the same	- fa	l	<u> </u>
	name of your spouse	e, former spouse, or legal equ	ivalent	
	Number Street			<del></del>
	City	State	Zip Code	<u> </u>
0 1- 0-1	a link all advances seem	lahtana Damatinahai	wanana aa aa daba aa da	and the state of t
again as	a codebtor only if tha	t person is a guarantor or o	osigner. Make sure you ha	our spouse is filing with you. List the person shown in line 2 ve listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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		2000		ago oo	31 7 0	
Fill in this information	to identify your case:					
Debtor 1 Ronnie	D		Smith			
First Nar	ne M	liddle Name	Last Name	)	Che	ock if this is:
Debtor 2 (Spouse, if filing) First Nar	ne M	liddle Name	Last Name	<u>,                                      </u>	- l 🗖	An amended filing
						A supplement showing post-petition chapter 1
United States Bankrupto the: Case number	cy Court for Northern	l	District of <u>Illinois</u> (State			expenses as of the following date:
(If known)					-	MM / DD / YYYY
Official Form	1061					
Schedule I: Y	our Income					12/1
information about you spouse. If more space number (if known). Ar	r spouse. If you are s is needed, attach a	separated and y separate sheet	our spouse is	not filing	with you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
Fill in your employn	ient		Debtor 1			Debtor 2
information.	Employme	ent status	<b>✓</b> Employed			Employed
If you have more that attach a separate pag	n one job,		Not Emplo	ved		Not Employed
information about ad employers.		on	Locator	, ou		
Include part time, sea	sonal, or <b>Employer</b>	s name	USIC Locating	Services, LL	С	
self-employed work.		s address	9045 River Rd	Ste 300		
Occupation may incluor homemaker, if it ap			Number Street			Number Street
			Indianapolis	Indiana	46240	
			City	State	Zip Code	City State Zip Code
	How long there?	employed	3 years			
Part 2: Give Detail	s About Monthly II	ncome				
Estimate monthly inc	come as of the date yo		f you have not	ning to repor	t for any line, v	write \$0 in the space. Include your non-filing
	spouse have more than		ombine the info	rmation for a	ll employers fo	or that person on the lines below. If you need
more space, attach a s	eparate sheet to this for	m.		For D	ebtor 1	For Debtor 2 or non-filing spouse
	s wages, salary, and cor paid monthly, calculate w				\$2,560.37	
3. Estimate and list	monthly overtime pay.		3.		+ \$0.00	
4. Calculate gross in	come. Add line 2 + line 3		4.		\$2,560.37	

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Debt	or 1Ronnie First Name	D Sm Middle Name Las	t Name		Case number   known)	(if		
	THOU NAME	inidae raine Lac	r Hamo		For Debtor 1	For Debtor 2 or non-filing spouse		
Co	py line 4 here		<b>→</b> 4.		\$2,560.37		•	
5. <b>Lis</b>	st all payroll ded							
5a	a. Tax, Medicare	, and Social Security deductions	58	a.	\$320.17			
5b	. Mandatory co	ntributions for retirement plans	51	<b>)</b> .	\$0.00			
50	. Voluntary cont	ributions for retirement plans	50	<b>.</b>	\$0.00			
50	d. Required repa	yments of retirement fund loans	50	d.	\$0.00			
5e	e. Insurance		56	Э.	\$0.00			
5f.	. Domestic supp	ort obligations	5f		\$0.00			
5g	g. Union dues		5	<b>3</b> .	\$0.00			
5h	n. Other deduction	ons. Specify:	51	1. +	\$0.00 +			
6. <b>Ad</b> +5h.	d the payroll de	<b>ductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5f +	5g 6.		\$320.17			
7. <b>Ca</b>	lculate total mo	onthly take-home pay. Subtract line 6 from line 4.	. 7.		\$2,240.20			
8. <b>Lis</b>	st all other incor	ne regularly received:						
8a	business, profe	•						
	gross receipts, o	ent for each property and business showing ordinary and necessary business expenses, and	0.		\$0.00			
Qh	the total monthle.  Interest and di		8a 81		\$0.00			
		t payments that you, a non-filing spouse, or a	01	<i>J</i> .				
	Include alimony	r, spousal support, child support, maintenance, ent, and property settlement.	80	D.	\$0.00	-		
80	d. Unemploymen	t compensation	80	d.	\$0.00			
8e	. Social Security	y	86	Э.	\$0.00			
8f.	Include cash ass cash assistance	ent assistance that you regularly receive sistance and the value (if known) of any non- that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es	81		\$0.00			
80	Pension or ret	irement income	89		\$0.00			
8h	n. Other monthly	rincome. Specify: Long Term Disability Income		1. +	\$810.77 +			
	-	<b>ne</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8l	h. 9.		\$810.77		]	
		<b>r income.</b> Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing spou	10 use	).	\$3,050.97 +		.] =	\$3,050.97
In frie	clude contributior ends or relatives.	gular contributions to the expenses that you li- ns from an unmarried partner, members of your ho amounts already included in lines 2-10 or amount	ousehold,	you	r dependents, your roomma			
Sp	pecify:						11. +	\$0.00
		n the last column of line 10 to the amount in line the Summary of Schedules and Statistical Summ					12.	\$3,050.97
12 5	10 VOII 02700+ 07	increase or decrease within the year offer year	u filo +hi-	for	m <sup>2</sup>			monthly income
13. 5	No.	increase or decrease within the year after you	u me tiils	1011				
Ë	Yes. Explain:							

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		Docu	ment Page 37 of 70		
Fill in this infor	mation to identify your	case:			
Debtor 1	Ronnie First Name	D Middle Name	Smith Last Name		
Debtor 2	i iist ivaine	whome warre	Last Name	Check if this is:	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng
United States B	Sankruptcy Court for the	e: Northern [	District of Illinois (State)		nowing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYYY	<del>,</del>
Official	Form 106J				
Schedul	e J: Your Exp	penses			12/15
information. If			e filing together, both are equall form. On the top of any additiona		
Part 1: Desc	cribe Your Househ	old			
1. Is this a join	nt case?				
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live in a	separate household?			
г	No				
-	Yes. Debtor 2 must <sup>1</sup>	file Official Forms 106J-2. <i>Expen</i>	ses for Separate Household of Debt	or 2.	
2. Do you have		No , , , ,			
Do not list D Debtor 2.	I V I	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
			Child	1 year	No.
			Office	ı you	Yes.
	penses include f people other	No			
than		Yes			
yourself and dependents	u your	163			
Part 2: Estir	mate Your Ongoing	Monthly Expenses			
	of a date after the ban		ou are using this form as a supploplemental Schedule J, check the		
•	•	-cash government assistance it on Schedule I: Your Income	-		Your expenses
	or home ownership e	expenses for your residence. In	clude first mortgage payments and		<b>\$400.00</b>
If not incl	uded in line 4:				

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Ronnie D Smith Case number (if known)
First Name Middle Name Last Name

	riist Name iviiddie Name Last Name		
Security   Security			Your expenses
6a. Electricity, heat, natural gas         6a.         \$200.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$160.00           6d. Other. Specify; Netflix         6d         \$10.00           7. Food and housekeeping supplies         7.         \$600.00           8. Childcare and children's education costs         8.         \$433.00           9. Clothing, laundry, and dry cleaning         9.         \$200.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$275.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$100.00           15. Instrationment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Instration include insurance deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           15. Life insurance         15a         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b. \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$150.00           6d. Other, Specify: Netflik         7c. \$600.00           7c. Food and housekceping supplies         7c. \$600.00           8c. Childcare and children's education costs         8c. \$433.00           9c. Citothing, laundry, and dry cleaning         9c. \$200.00           9c. Citothing, laundry, and dry cleaning         9c. \$200.00           10. Personal care products and services         11c. \$25.00           11. Medical and dental expenses         11. \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12c. \$275.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           14. Charitable contributions and religious donations         14. \$100.00           15. Insurance.         15         \$0.00           15b. Insurance         15         \$0.00           15c. Vehicle insurance educted from your pay or included in lines 4 or 20.         15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance         156         \$0.00         \$0.00         15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance         \$0.00         15c. Taxes. Do not include taxes ded	6. Utilities:		
6c. Telephone, cell phone, Internett, satellite, and cable services         6c.         \$150.00           6d. Other, Specify; Nerlitis         6d.         \$10.00           7. Food and housekeeping supplies         8.         \$433.00           8. Childcare and children's education costs         8.         \$433.00           9. Clothing, laundry, and dry cleaning         9.         \$200.00           10. Personal care products and services         10.         \$100.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.	6a. Electricity, heat, natural gas	6a.	\$200.00
6d. Other. Specify: Netflix         6d         \$10.00           7. Food and housekeeping supplies         7.         \$60.00           8. Childcare and children's education costs         8.         \$433.00           9. Clothing, laundry, and dry cleaning         9.         \$200.00           10. Personal care products and services         10.         \$100.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$275.00           10. not include care payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         15.         \$0.00           15. Insurance.         15a         \$0.00           15a. Life insurance         15a         \$0.00           15b. Health insurance         15c         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17. Installment or	6b. Water, sewer, garbage collection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$600.00           8. Childcare and children's education costs         8.         \$433.00           9. Clothing, laundry, and dry cleaning         9.         \$200.00           10. Personal care products and services         10.         \$100.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$275.00           Do not include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$100.00           15. Insurance.         15a         \$0.00           15. Insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance.         15a         \$0.00           15c. Vehicle insurance.         15a         \$0.00           15c. Vehicle insurance.         \$0.00         15c. Vehicle insurance.         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00 </td <td>6c. Telephone, cell phone, Internet, satellite, and cable services</td> <td>6c.</td> <td>\$150.00</td>	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$150.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 11. \$25.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. Lesith insurance 15b \$0.00 15c. Vehicle insurance 15c. Vehicle insurance 15d. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. \$0.00 17c. Other. Specify: Gym Membership 17c. Other. Specify: Gym Membership 17d. Other. Specify: Gym Membership 17d. Other. Specify: Gym Membership 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. \$50.00 18. Your payments you make to support ot betres who do not live with you. Specify: Voluntary Support to Mother of Child 19. \$500.00 20. Charles a property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Seale state taxes. 20c. Specify: Noneowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Specify. Membership.	6d. Other. Specify: Netflix	6d	\$10.00
9.   \$200.00	7. Food and housekeeping supplies	7.	\$600.00
10, Personal care products and services   10, \$100.00     11, Medical and dental expenses   11, \$25.00     12, Transportation, Include gas, maintenance, bus or train fare.	8. Childcare and children's education costs	8.	\$433.00
11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$275.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$100.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15b. Health insurance       15a.       \$0.00         15b. Health insurance       15c.       \$0.00	9. Clothing, laundry, and dry cleaning	9.	\$200.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. So.00 15c. Vehicle insurance 15d. So.00 15c. Vehicle insurance 15d. So.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. So.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. So.00 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. So.00 17c. Other. Specify: Gym Membership 17c. Seo.00 17c. Other. Specify: 17d. So.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: Voluntary Support to Mother of Child 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. So.00 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. So.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and services	10.	\$100.00
Do not include car payments   13.   13.   13.   13.   13.   13.   13.   13.   13.   13.   14.   14.   14.   15.   10.   14.   15.   10.   15.	11. Medical and dental expenses	11.	\$25.00
14. Charitable contributions and religious donations   14. \$100.00		12.	\$275.00
15. Insurance.	13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$0.00 15c. Vehicle insurance   15c   \$0.00 15c. Other insurance. Specify:   15d   \$0.00 15d. Other insurance. Specify:   15d   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	14. Charitable contributions and religious donations	14.	\$100.00
15b. Health insurance			
15c. Vehicle insurance	15a. Life insurance	15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance	15b	\$0.00
Specify:	15c. Vehicle insurance	15c	\$0.00
Specify:	15d. Other insurance. Specify:	15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17a. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify: Gym Membership  17c. S60.00  17d. Other. Specify: 17d  \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17a. \$0.00  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify: Gym Membership  17d. \$60.00  17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child  19. \$500.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	Specify:	16	\$0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Gym Membership 17d. Other. Specify: 17d \$60.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: Voluntary Support to Mother of Child 19. \$500.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17. Installment or lease payments:	10	
17c. Other. Specify: Gym Membership  17d. Other. Specify: 17d. \$60.00  17d. Other. Specify: 17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child 19. \$500.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00  20b. Real estate taxes. 20b \$0.00  20c. Property, homeowner's, or renter's insurance 20c \$0.00  20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		17a	\$0.00
17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child 19. \$500.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00  20b. Real estate taxes. 20b \$0.00  20c. Property, homeowner's, or renter's insurance 20c \$0.00  20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17b. Car payments for Vehicle 2	17b	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20c \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	17c. Other. Specify: Gym Membership	17c	\$60.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child  19. \$500.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	17d. Other. Specify:	17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify: Voluntary Support to Mother of Child  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20c. S0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			\$0.00
Specify: Voluntary Support to Mother of Child  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20c Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		10	\$500.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		19.	\$300.00
20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance 20c \$0.00  20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's, or renter's insurance		
	20d. Maintenance, repair, and upkeep expenses.		
	20e. Homeowner's association or condominium dues	20e	\$0.00

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Debtor 1	Ronnie	D	Smith	Case number (if known)	
	First Name	Middle Name	Last Name		
21. <b>Othe</b>	. Specify:			21	\$0.00
22. Calc	ulate your monthly ex	penses.			\$3,053.00
22a. /	Add lines 4 through 21.				\$0.00
22b.	Copy line 22 (monthly e	expenses for Debtor 2), if any,	from Official Form 106J-2		\$3,053.00
22c. /	Add line 22a and 22b. T	he result is your monthly exp	enses.	22.	
23.Calcu	late your monthly net	income.			
23a. (	Copy line 12 (your com	bined monthly income) from	Schedule I.	23a	\$3,050.97
23b.	Copy your monthly exp	enses from line 22 above.		23b	\$3,053.00
		expenses from your monthly i	ncome.		(\$2.03)
	The result is your mont	hly net income.		23c	
24 Do v	ou expect an increase	or decrease in your expen	ses within the vear after	you file this form?	
•	•		•		
		to finish paying for your car lase or decrease because of a r			
111011	gage payment to increa	ise of decrease because of a f	nodincation to the terms of	your mongage:	
	lo				
<b>I</b>	'es				
ت	Fortile borns				
	Explain here:	ith his mother and contribute	on towards the household o	xpenses (rent, food, utilities and pays for a portion	of
				rents his son and he pays \$100 per week in daycar	
				o formal child support order has yet been entered.	

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Ronnie	D	Smith	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	

#### Official Form 106Dec

П	Check if this is an
	amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and						
×	/s/ Ronnie Smith	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 3/15/2017	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Debtor 1	Ronnie	С	)	Smith				
Debtor 1	First Name		Middle Name	Last Nam	e			
Debtor 2 (Spouse, if fil	ing) First Name		Middle Name	Last Nam	e			
United Sta	tes Bankruptcy Court			District of Illino				
Case num				(State	e)			
(If known)								<b>—</b> • • • • • • • • • • • • • • • • • • •
Offici	al Form 10	7						Check if this is amended filing
Stater	nent of Fina	— incial Affai	irs for In	dividuals	Filina for	Bankru	ıptcv	12.
Be as con nformation	nplete and accurat	e as possible. If t s needed, attach	two married p	eople are filing t	together, both	are equally	responsible for	supplying correct your name and case
Part 1:	Give Details Abou	t Your Marital S	Status and Wh	here You Lived	Before			
1. Wha	at is your current ma	rital status?						
П	Married							
<b>✓</b>	Not married							
2. Dur	ing the last 3 years,	have you lived an	ywhere other t	han where you liv	ve now?			
2. Dur	ing the last 3 years,	have you lived an	ywhere other t	han where you liv	ve now?			
2. Dur				•		OW.		
2. Dur	No			•		ow.		
2. Dur	No		the last 3 years	•		ow.		Dates Debtor 2 lived there
2. Dur	No Yes. List all of the p		the last 3 years	s. Do not include v	vhere you live r			there
2. Dur	No Yes. List all of the p  Debtor 1:		the last 3 years	s. Do not include v	vhere you live r	Ow. Debtor 1		
2. Dur	No Yes. List all of the p		the last 3 years  Dates there	s. Do not include v	vhere you live r	Debtor 1		there
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive		the last 3 years  Dates there	s. Do not include v	Debtor 2:	Debtor 1		Same as Debtor 1
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive Number Street  Romeoville Illir	laces you lived in t	Dates there  From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et		Same as Debtor 1 From
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive  Number Street	laces you lived in t	Dates there  From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et State	Zip Code	Same as Debtor 1  From To
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive Number Street  Romeoville Illir	laces you lived in t	Dates there  From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et	Zip Code	Same as Debtor 1 From
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive Number Street  Romeoville Illir	laces you lived in t	Dates there  From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et State Debtor 1	Zip Code	Same as Debtor 1  From To
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive Number Street  Romeoville Illir City Sta	laces you lived in t	Dates there From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et State Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1
2. Dur	No Yes. List all of the p  Debtor 1:  647 Edward Drive Number Street  Romeoville Illir City Sta	laces you lived in to	Dates there  From To  From To	s. Do not include v s Debtor 1 lived	Debtor 2:  Same as  Number Stre	Debtor 1 et State Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1  From

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Smith

D

Debtor 1 Ronnie Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$1290.48 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$44084.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$37038.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) VA Disability \$2,493.00 From January 1 of current year until UE \$2,552.00 the date you filed for bankruptcy: VA Disability \$9,972.00 For last calendar year: UE \$319.00 (January 1 to December 31, 2016 VA Disability \$9,972.00 For the calendar year before that: (January 1 to December 31, 2015

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D Smith Debtor 1 Ronnie \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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btor 1 Ronnie		D	Sm	ith	Case number	(if known)
First Name		Middle Name	Last	t Name		
Insiders include you corporations of wagent, including on such as child sup	our relatives; a hich you are a one for a busir	any general partner an officer, director, ness you operate a	s; relatives of any operson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider?  you are a general partner; g securities; and any managing r domestic support obligations,
<b>✓</b> No						
Yes. List all p	payments to	an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Nam	ıe					
Number Stree	et					
City	State	Zip Code				
Insider's Nam	ıe					
Number Stree	et					
City	State	Zip Code				
Within 1 year bei	fore you filed	l for bankruptcy,	did you make any	payments or trans	fer any property o	on account of a debt that benefited an
Include payments	on debts gua	aranteed or cosigne	ed by an insider.			
✓ No						
Yes. List all p	payments tha	at benefited an ins	sider.			
			Dates of	Total amount	Amount you still owe	Reason for this payment
			payment	paid	Still Owe	Include creditor's name
Insider's Nam	ie					
Number Stree	et					
City	State	Zip Code				
Insider's Nam	ie					
Number Stree	et					
City	State	Zip Code				

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Debtor 1 Ronnie D Smith Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Deb	tor 1 Ronnie First Name	D Middle Name	Smith Last Name	Case number (if known)	
11.		to make a payment because y		oank or financial institution, set off any amo	ounts from your
			Describe the action th	e creditor took  Date action was taken	Amount
	Creditor's Name		-		
	Number Street		Last 4 digits of account	number: XXXX-	
	City	State Zip Code	-		
12.		e you filed for bankruptcy, was a custodian, or another officia		possession of an assignee for the benefit of	creditors, a court-
	✓ No Yes				
Part	5: List Certain G	ifts and Contributions			
13.	✓ No  Yes. Fill in the	details for each gift.		otal value of more than \$600 per person?	
	Gifts with a tot per person	al value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom	n You Gave the Gift	-		
	Number Street		-		
	City Person's relation	State Zip Code uship to you	_		
	Person to Whom	n You Gave the Gift	- -		
	Number Street		-		
	City Person's relation	State Zip Code	-		

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Debtor 1	Ronnie	D	Smith	Case number (if know	vn)	
	First Name	Middle Name	Last Name	<u> </u>		
4. Wit	thin 2 years before you	ı filed for bankruptcy, d	id you give any gifts or contrib	utions with a total value	of more than \$600	to any charity?
<b>✓</b>	No					
H		for each gift or contribu	ıtion			
ш	165. I III III III G GEIGIIS	sior each girt or contribt	duoi i.			
	Gifts or contribution		Describe what you conti	ributed	Date you	Value
	that total more than	\$600			contributed	
	Charity's Name					
	· · · · · · ·					
	Number Street		_			
	City St	ate Zip Code				
	•	·				
rt 6:	<b>List Certain Losses</b>	S				
. Wit	hin 1 year before you	filed for bankruptcy or	since you filed for bankruptcy,	did you lose anything bed	cause of theft, fire,	other disaster, or
gar	nbling?					
<b>✓</b>	No					
	Yes. Fill in the details					
	Describe the proper		Describe any insurance		Date of your	Value of property
	how the loss occurre	ed	Include the amount that in		loss	lost
			pending insurance claims	on line 33 of Schedule		
			A/B: Property.			
	List Certain Payme					
	No					
<b>✓</b>	Yes. Fill in the details					
			Description and value of	any property	Date payment	Amount of
			transferred	any property	or transfer	payment
					was made	
	Semrad Law Firm		Attorney's Fee - 0.00		2/6/2017	\$0.00
	Person Who Was Paid	I				•
	2424 Plainfield Road					
	Number Street					
	Suite 300					
			_			
		nois 60403 ate Zip Code	_			
	City Sta	ate Zip Code				
	Email or website addre	ess	<del>-</del>			
	None					
	Person Who Made the	e Payment, if Not You				
					- 1	
	Person Who Was Paid		<del>-</del>			
		<del>.</del>				
	Number Street		_			
			_			
	City Sta	ate Zip Code	<del>-</del>			
	Only St	ate Zip Code				
	Email or website addre	ess	<del>-</del>			
	Email or website addre	ess	_			

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Debto	or 1 Ronnie D	Smith	Case number (if known)	
	First Name Middle Na	me Last Name		
ŀ	Within 1 year before you filed for bankrupt help you deal with your creditors or to mal Do not include any payment or transfer that you	ke payments to your creditors?	your behalf pay or transfer any property to any	one who promised to
ļ	Yes. Fill in the details.			
ı	res. I ill ill the details.	Description and value of	fany property Date A	Amount of payment
		transferred	payment or transfer was made	amount of payment
	Person Who Was Paid		-	
	Number Street			
	City State Zip Co	ode		
	, and a second			
- 1	the ordinary course of your business or final Include both outright transfers and transfers in and transfers that you have already listed on the No Yes. Fill in the details.	nade as security (such as the granting o	of a security interest or mortgage on your property).	Do not include gifts
•	_	Description and value of property transferred	f any Describe any property or payments received or debts paid in exchange	Date d transfer was made
	Person Who Received Transfer			
	Number Street			
	City State Zip Co Person's relationship to you	ode		
	Person Who Received Transfer			
	Number Street			
	City State Zip Co Person's relationship to you	ode		
ŀ	beneficiary? (These are often called asset-protection device		o a self-settled trust or similar device of which	you are a
ļ	No			
	Yes. Fill in the details.			
		Description and value of	of the property transferred	Date transfer was made
	Name of trust			

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Debtor 1 Ronnie D Smith Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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D Smith Debtor 1 Ronnie Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt		Ronnie		D		mith	Cas	e number <i>(ii</i>	fknown)		
		First Name		Middle Name	Lá	ast Name					
26.	Hav	e you been a part	y in any judic	cial or administ	rative proce	eding under	any environmen	ital law? In	clude settler	ments and ord	ers.
		No Yes. Fill in the det	tails.								
					Court or ag	gency		Nature (	of the case		Status of the case
		Case title									Pending
					Court Name						On appeal
		Case number					7. 0. 1.				Concluded
Dout	27.	Give Details Al	hout Vour E	Rucinoss or C	City	State	Zip Code				
Part						-		6.11.			•
27.	With	nin 4 years before			-		r activity, either for	_		o any business	5?
					-		artnership (LLP)	ull-ullie or p	Jai t-tii ile		
		A partner in a	-		uo of a corm	aration					
		_		naging executi of the voting or	-		poration				
	<b>✓</b>	No. None of the a	above applie	s. Go to Part 12	2.						
		Yes. Check all that	at apply abo	ve and fill in the					Employer I	doutification v	www.bow.Do.wot
					Desc	ribe the nati	ure of the busine	SS			number Do not number or ITIN.
		Business Name			<del></del>				EIN:		
		Number Street			— Name	e of account	ant or bookkeep	er	Dates busi	ness existed	
		City	State	Zip Code	_	o or account	unt of Bookkoop		From	To	
					Desc	ribe the natu	ure of the busine	SS			number Do not number or ITIN.
		Business Name							EIN:		
		Number Street			_				Dates busi	ness existed	
		City	State	Zip Code	Name	e of account	ant or bookkeep	er	From	То	
					Desc	ribe the nati	ure of the busine	ss	Employer I	dentification r	number Do not
					2030	av nate			include So		umber or ITIN.
		Business Name							EIN:		
		Number Street			— Name	e of account	ant or bookkeep	er	Dates busi	ness existed	
		City	State	Zip Code	_				From	To	

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Debto	or 1 Ronnie	D	Smith	Case number (if known)
	First Name	Middle Name	Last Name	
	Within 2 years before you file creditors, or other parties.  No	d for bankruptcy, did y	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
Ī	Yes. Fill in the details bel	OW.		
			Date issued	
	Name		MM/DD/YYYY	
	Name			
	Number Street		_	
	City State	Zip Code	<u> </u>	
	Oity State	Zip Code		
Part 1	12: Sign Below			
tru	ue and correct. I understand	that making a false st	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Ronnie	Cm ith		×
	Signature of D			Signature of Debtor 2
	D . 045/00			Date
	Date 3/15/20	17		
Die	d you attach additional page	s to Your Statement o	f Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
<b>✓</b>	No			
	Yes			
Di	d you pay or agree to pay so	meone who is not an a	ttorney to help you fill out b	pankruptcy forms?
<b> </b>	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Ronnie	D	Smith		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number					

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Ronnie	D	Smith	Case number (if		
1	First Name	Middle Name	Last Name	known)		
Part 2:	List Your Unexpired Perso	onal Property Leases				
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).						
Des	cribe your unexpired personal	property leases		Will the lease be assumed?		
Les	sor's name:			□ No □ Yes		
	cription of leased perty:					
Les	sor's name:			□ No □ Yes		
	cription of leased perty:					
Les	sor's name:			No Yes		
	cription of leased perty:					
Les	sor's name:			No Yes		
	cription of leased perty:					
Les	sor's name:			No Yes		
	cription of leased perty:					
Les	sor's name:			No Yes		
	cription of leased perty:					
Les	sor's name:			No Yes		
	cription of leased perty:					
Part 3:	Sign Below					
	r penalty of perjury, I declare t erty that is subject to an unexp		intention about any prop	perty of my estate that secures a debt and any personal		
_	/s/ Ronnie Smith		Signatu	ire of Debtor 2		
SI	griature or Debtor 1		Signatu	IIG OI DEDIOI 2		
Da	ate 3/15/2017 MM/DD/YYYY		Date	MM/DD/YYYY		

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re	Ronnie D Smith	Northon Die	Cas	e No.	
	Debtor		043		(If known)
			Cha	pter	Chapter 7
D	ISCLOSURE OF C	OMPENSATI	ON OF ATTOF	RNEY FO	OR DEBTOR
compe	ant to 11 U.S.C. § 329(a) and Fe ensation paid to me within one y ed or to be rendered on behalf o	ear before the filing of t	he petition in bankruptcy,	or agreed to I	be paid to me, for services
For le	gal services, I have agreed to acc	ept			\$1,465.00
Prior t	o the filing of this statement I ha	ave received			\$0.00
Baland	ce Due				\$1,465.00
2. The so	ource of the compensation paid	to me was:			
	<b>✓</b> Debtor	Other (spec	fy)		
3. The so	ource of the compensation paid	to me is:			
	<b>✓</b> Debtor	Other (spec	fy)		
4. 🚺 I h	nave not agreed to share the abo embers and associates of my lav	ve-disclosed compensa v firm.	tion with any other perso	n unless they	are
Шm	nave agreed to share the above-o embers or associates of my law e people sharing in the compen:	firm. A copy of the agree			
	rn for the above-disclosed fee, I Analysis of the debtor's financ bankruptcy;				
b.	Preparation and filing of any p	etition, schedules, state	ments of affairs and plan	which may be	required;
C.	Representation of the debtor a	t the meeting of creditor	rs and confirmation hearin	ng, and any ac	ljourned hearings thereof;
6. By agr	reement with the debtor(s), the a	bove-disclosed fee does	s not include the following	g services:	
		CERTIF	FICATION		
	that the foregoing is a complete this bankruptcy proceedings.	statement of any agree	ment or arrangement for p	payment to me	e for representation of the
	3/15/2017		/s/ Brenda Lil	kavec	
	Date		Signature of At	torney	
			Semrad Law	Firm	
	_		Name of law	firm	

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# CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1465.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$30.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

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Client ID

Rev 3/2016

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Client Client Client Attorney Rule Care

RJ

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	<u> </u>	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Smith, Ronnie D.  Debtor(s)	Case No	Case No.		
		Chapter.	Chapter7		
	VERIFICAT	TION OF CREDITOR MAT	RIX		
Ti knowledge	he above named Debtors hereby verify tha e.	t the attached list of creditors is tro	ue and correct to the best of their		
Date:	3/15/2017	/s/ Smith, Ronnie Smith, Ronnie D Signature of Deb			

CREDIT ACCEPTANCE 25505 West 12 Mile Road Ste. 3000 Southfield, MI, 48034

Blitt and Gaines 661 Glenn Ave Wheeling, IL, 60090

ALLNCE COL Po Box 1267 Marshfield, WI, 54449

ARS ACCOUNT RESOLUTION 1801 NW 66TH AVE STE 200 PLANTATION, FL, 33313

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

Verizon Wireless - Bankruptcy 500 Technology Dr Saint Charles, MO, 63304

COMMONWEALTH FINANCIAL 245 Main St Scranton, PA, 18519

MARINR FINC 1748 Gunbarrel Rd #100 Chattanooga, TN, 37421

SECURITY FIN C/O SECURITY FINAN POB 3146 SPARTANBURG, SC, 29304

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364 PIONEERMCB 4000 S EASTERN AVE STE 3 LAS VEGAS, NV, 89119

OMNI FINANCIAL OF NC 431 WESTERN BLVD STE H JACKSONVILLE, NC, 28546

PIONEERMCB 4000 S EASTERN AVE STE 3 LAS VEGAS, NV, 89119

NAVY FEDERAL CR UNION 820 FOLLIN LN SE VIENNA, VA, 22180

MARINE FEDERAL CREDIT 159 BRYNN MARR RD JACKSONVILLE, NC, 28546

USA LOANS 13543 Cicero Ave Crestwood, IL, 60445

Americash - Bankruptcy PO Box 184 Des Plaines, IL, 60016 Case 17-08165 Doc 1 Filed 03/15/17 Entered 03/15/17 16:53:59 Desc Main Document Page 65 of 70

Debtor 1 Ronnie First Name	D Smi Middle Name Last	ith Case n	number (if known)	
	estions for Reporting Purposes	rvano		
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily bu	rimarily for a personal, famil usiness debts? Business de estment or through the ope	ly, or household purpose."  lebts are debts that you incurred to eration of the business or investment	o obtain
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund.		y exempt property is excluded and a te to unsecured creditors?	dministrative
18. How many creditors do you estimate that you owe?	<ul><li>✓ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,00 More than 100,	0
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 mi \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	million	1-\$10 billion 01-\$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 mi \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	million	1-\$10 billion 01-\$50 billion
Part 7: Sign Below	I have examined this petition, and		and the state of the second on the state of	ded to two oned
For you	correct.  If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7.  If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false staten connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 15	oter 7, I am aware that I may inderstand the relief available did not pay or agree to pay d and read the notice requir the chapter of title 11, Unit nent, concealing property, of e can result in fines up to \$	r proceed, if eligible, under Chapte ole under each chapter, and I choos resone who is not an attorney red by 11 U.S.C. § 342(b). ted States Code, specified in this or obtaining money or property by	er 7, 11,12, or 13 use to proceed to help me fill petition.
	Executed on 3/15/2017 MM / DD / Y	<del>////</del>	Executed on	

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		Doci	ument Page 6	66 of 70	
Fill in this infor	mation to identify your	case:	MANAGER AND SO	4.50	
Debtor 1	Ronnie First Name	D Middle Name	Smith Last Name		
Debtor 2 (Spouse, if filing)	-				
ment to store until	First Name  Bankruptcy Court for the:	Middle Name Northem	Last Name District of Illinois		
Case number	dikiupicy oddit for tife.	Northern	(State)		
(If known)	<del></del>				Check if this is an
Official	Form 106De	ec			amended filing
Declarati	ion About an	Individual Debt	or's Schedule	s	12/15
If two married p	people are filing togetl	ner, both are equally respon	nsible for supplying corr	ect information.	
money or prope				Making a false statement, con to \$250,000, or imprisonment f	
Part 1: Sign	Below				
Did you pa	ay or agree to pay som	eone who is NOT an attorn	ey to help you fill out ba	nkruptcy forms?	
✓ No					
Yes. N	Name of person		Attach Bankrupto Signature (Official	y Petition Preparer's Notice, Decla I Form 119).	ration, and

Signature of Debtor 2

MM/DD/YYYY

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Ronnie Smith Signature of Debtor 1

Date 3/15/2017

MM/DD/YYYY

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Debtor 1	1 Ronnie	D	Smith	Case number (if known)
	First Name	Middle Name	Last Name	
	editors, or other parties.	or bankruptcy, did y	ou give a financial state	ement to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details below.			
	_		Date issued	
	Name		MM/DD/YYYY	<u> </u>
	Number Street		-	
	City State	Zip Code		
Part 12	: Sign Below			
true	and correct. I understand the inkruptcy case can result in fi	at making a false stanes up to \$250,000,	tement, concealing pro	hments, and I declare under penalty of perjury that the answers are operty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debt	or 1		Signature of Debtor 2
	Date 3/15/2017			Date
Did	you attach additional pages t	o Your Statement of	Financial Affairs for Inc	dividuals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to pay some	one who is not an at	ttorney to help you fill o	ut bankruptcy forms?
<b>V</b>	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Debtor	Ronnie	D	Smith	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unex	pired Personal Property Lease	es	
informa	tion below. Do no	al property lease that you listed in t list real estate leases. Unexpired sonal property lease if the trustee	leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpi	red personal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Des pro	sor's name:			□ No □ Yes
	scription of leased perty:			
	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
pro	scription of leased perty:			
	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Part 3:	Sign Below			Shira Maria
Unde	er penalty of perju	ry, I declare that I have indicated r	ny intention about any	property of my estate that secures a debt and any personal
_	/s/ Ronnie Smith	1 De Sous	) 🗶 Się	gnature of Debtor 2
	ate 3/15/2017 MM/DD/YYYY		Da	

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#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Smith, Ronnie D.  Debtor(s)	Case No	se No							
		Chapter	Chapter7							
VERIFICATION OF CREDITOR MATRIX										
The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.										
Date:	3/15/2017	/s/ Smith, Ronnie Smith, Ronnie D. Signature of Debte								

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Debtor 1 Ronnie	D	Smith	Case number (if	known)	
First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spot	R T
8. Unemployment compensation Do not enter the amount if you or under the Social Security Act. Inst		ceived was a benefit	\$478.50	—————	
For you For your spouse		<u>\$0.00</u> \$0.00			
9. Pension or retirement income.		nt received that was a	\$0.00		
benefit under the Social Security A  10.Income from all other sources amount. Do not include any bene payments received as a victim of international or domestic terrorism page and put the total below.	s not listed above. Specify efits received under the Social a war crime, a crime agains	cial Security Act or st humanity, or			
Long-Term Disability	· ·		\$810.77		
Total amounts from separate pag	es, if any.		+\$0.00	+	
11. Calculate your total current reach	nonthly income. Add line	s 2 through 10 for	\$3,819.63	+	<b>=</b> \$3,819.63
column. Then add the total for	Column A to the total for C	Column B.			Total current
Part 2: Determine Whether th	ne Means Test Applies	s to You			monthly income
12. Calculate your current monthl	y income for the year. Fo	ollow these steps:			
12a. Copy your total current mon	thly income from line 11.		Co	py line 11 here →	\$3,819.63
Multiply by 12 (the number	of months in a year).				X 12
12b. The result is your annual inc	ome for this part of the for	m.			12b. <u>\$45,835.56</u>
13 Calculate the median family in	come that applies to you	. Follow these steps:			
Fill in the state in which you live.		Illinois			
Fill in the number of people in you	ur household.	2			
Fill in the median family income for household.	or your state and size of	40		ja .	13. \$65,659.00
To find a list of applicable median instructions for this form. This list 14. How do the lines compare?					и
14a. Line 12b is less than or Go to Part 3.	equal to line 13. On the to	p of page 1, check box	1, There is no presumption	of abuse.	
14b. Line 12b is more than li Go to Part 3 and fill out	ne 13. On the top of page Form 122A-2.	1, check box 2, The p	resumption of abuse is deter	rmined by Form 122A-	2.
Part 3: Sign Below				and the second second	
By signing here, I declare under	penalty of perjury that the	information on this stat	ement and in any attachmer	nts is true and correct.	
*	/ //				
✗ /s/ Ronnie Smith Signature of Debtor	Jones	<u> </u>	Signature of Debtor 2		<del></del>
Date 3/15/2017 MM/DD/YYYY			Date 3/15/2017 MM/DD/YYYY		
If you checked line 14a, do NO If you checked line 14b, fill ou					